State of North Carolina
Department of Environment and Natural Resources
Division of Waste Management

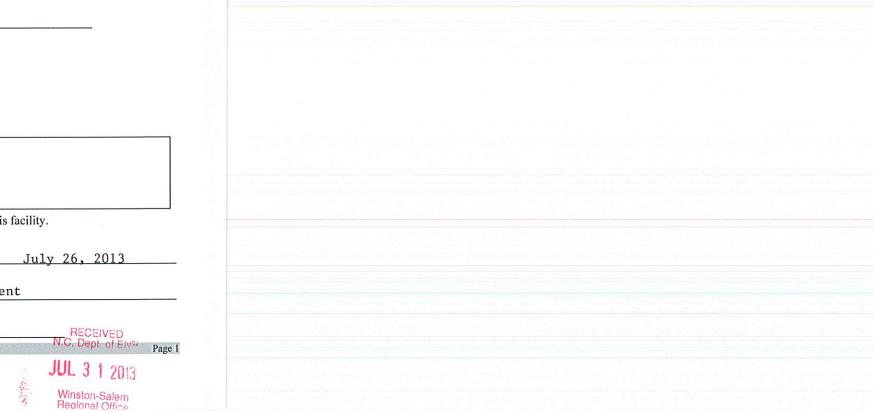
For the

## LAND CLEARING & INERT DEBRIS LANDFILL

Facility Annual Report
For the period of July 1, 2012-June 30, 2013

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2013 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

| Facility Name: Cossie Doggett Demo Landfill                               | Permit: 41J-LCID                                     |
|---|--|
| Facility Website (URL): N/A   | ID P0451   |
| Physical Address  | Mailing Address                                      |
| Street 1: 2124 Scalesville Road   | Street 1: 2124 Scalesville Road                      |
| Street 2:   | Street 2:  |
| City: Summerfield County: Guilford  | City: Summerfield                                    |
| State: North Carolina Zip: 27358  | State: North Carolina Zip: 27358                     |
| Primary Facility Contact Person   | Billing Contact Person                               |
| Name: Mark Doggett, Gary Swing  | Name: Mark Doggett, Gary Swing                       |
| Phone: 336-643-4103 Fax: 336-643-7358                                     | Phone: 336-643-4103 Fax: 336-643-7358                |
| Email: dcc4103@bellsouth.net  | Email: dcc4103@be11south.net                         |
| 1. Tipping Fee: \$ 55 per T/A   |  |
| Tipping Fee: \$ 50 per Tan  |  |
| Tipping Fee: \$ 70 per T/T  |  |
| 2. Estimate the amount of waste taken in an average week at this facility | tons   |
|   | EY? 600   ☐ Cubic yards                              |
| 3. How many weeks did you operate this year?52                            |  |
| 4. What are the hours/days of operation for this facility? 7:00 A.        | M. to 5:00 P.M.                                      |
| 5. What is the acreage of the footprint of the waste on site as of June 3 | 0? 9.7 Acre(s)                                       |
| 6. Did your facility stop receiving waste during this past Fiscal Year?   | Yes X No   |
| If so, please report the date this occurred:                              |  |
| REMINDER: According to (G.S. 130A-309.09D(b)), this                       | e return your completed report to:                   |
|   | r. Hugh Jernigan                                     |
| sent to the County Manager of each county from which                      |  |
| waste was received.   |  |
| CERTIFICATION: I certify that the information provided is an accura       | tte representation of the activity at this facility. |
| Signature:  | Date:  |
| Name: Gary L. Swing   | Title:Vice-President                                 |
| Phone Number: 336-643-4103 Email: dcc4103@                                | bellsouth.net  |
| LCID 2013   | N.C. Dept. of ENR Page                               |



NC DENR Division of Waste Management - Solid Waste Section

Risk Assessment Form

| acility Nam  | e: Cossie Doggett  | Demo Landfill   |                 |           |          | Permit:      | 41J-I      | LCID       |
|--------------|--|---|-----------------|-----------|----------|--------------|------------|------------|
| Address: 2   | 124 Scalesville Ro   | ad  |                 |           |          |              |            |            |
| City: Sun    | merfield   | State: North Carolina   |                 | Zi        | p:27     | 358          |            |            |
| erson comp   | oleting Assessment: Gar                                      | y Swing   |                 |           |          | Date:7       | /26/201    | 13         |
| Phone Numb   | per: 336-643-4103  | Fax: 336-643-7358   | Email: <u>d</u> | cc4103    | 3@be11   | south.ne     | t          |            |
| nstructions: | determine the distance or                                    | s or No for each Receptor and Po<br>distances for each Receptor fror<br>mation into the form. Please atta<br>c. | n the Edge      | of Wast   | e (using | range finde  | ers and/or |            |
| eceptors     |  |   |                 |           |          |              |            |            |
| 1. Are ther  | e Residential Dwellings Wi                                   | thin 1,500 feet of the Edge of Wa   | iste?           | X         | ] Yes    | ☐ No         |            |            |
|              | es, how many? $\underline{}$ 1 at are the three closest dist | ances from the Edge of Waste?   | 900             | Feet      | 1800     | Feet         | 1800       | Feet       |
| 2. Are ther  | e Potable Wells Within 1,5                                   | 00 feet of the Edge of Waste?   |                 | _<br>     | ] Yes    | <br>No       |            |            |
| If Y         | es, how many?1   |   |                 |           |          |              |            | 200        |
| Wha          | at are the three closest dist                                | ances from the Edge of Waste?   | 900             | Feet<br>— | 1800     | Feet<br>——   | 1800       | Feet       |
| 3. Are ther  | e Community/Municipal W                                      | ells Within 1,500 feet of the Edge  | of Waste?       |           | ] Yes    | ☐ No         |            |            |
| If Y         | es, how many?N/A   |   |                 |           |          |              |            |            |
| Wha          | at are the three closest dist                                | ances from the Edge of Waste?   |                 | Feet<br>— |          | Feet<br>——   |            | Feet<br>—— |
| 4. Are ther  | e Surface Water Bodies W                                     | fithin 1,500 feet of the Edge of W  | aste?           |           | ] Yes    | ☐ No         |            |            |
|              | es, how many? $N/A$ at are the three closest dist            | ances from the Edge of Waste?   |                 | Feet      |          | Feet         |            | Feet       |
| Ple          | ase list the names of the w                                  | ater bodies:  |                 |           |          |              |            |            |
| 5. Is Public | c Water Available Within 1,                                  | 500 feet of the Edge of Waste?  |                 |           | ] Yes    | $oxed{X}$ No |            |            |
| If Y         | es, how many of the Resid                                    | ential Dwellings noted above are  | connected'      | ?         |          |              |            |            |
| orrective N  | <u>leasures</u>  |   |                 |           |          |              |            |            |
| 6. Is there  | an active methane extracti                                   | on system (blower, flare, etc.)?  |                 |           | ] Yes    | X No         |            |            |
| 7. Is there  | a passive methane extract                                    | ion system (trench, vents in cap,   | flare, etc.)?   |           | Yes      | X No         |            |            |
| 8. Is there  | groundwater remediation t                                    | aking place on site?  |                 |           | ] Yes    | X No         |            |            |
| If Yes,      | what is the specific remedia                                 | al technology used?   |                 |           |          |              |            |            |
| omments      |  |   |                 |           |          |              |            |            |
|              |  |   |                 |           |          |              |            |            |
|              |  |   |                 |           |          |              |            |            |
|              |  |   |                 |           |          |              |            |            |